FEC FORM 2 STATEMENT OF CANDIDACY

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(a) Name of Candidate (in fi	(ilı)				
West, Cornel (b) Address (number and street) ☐ Check if address changed P.O. Box 8207, 8150 Leesburg Pike Suite 180B			2. FEC Candidate Identification Number		
(c) City, State, and ZIP Cod Vienna, Virginia 22182	9		3. Is This - New Amended Statement X (N) OR (A)		
Party Affiliation People's Party	5. Office Sought President	6. State & Dis	strict of Candidate		
	DESIGNATION OF PRINC	CIPAL CAMPAIG	IN COMMITTEE		
7. I hereby designate the follow	wing named political committee as my P	rincipal Campaign Com	nmittee for the 2024 election(s).		
	ould be filed with the appropriate office I		(year of election)		
(a) Name of Committee (in	full)				
Cornel West for	or President				
(b) Address (number and st	•				
P.O. Box 820	07, 8150 Leesbu	urg Pike S	Suite 180B		
(c) City, State, and ZIP Cod					
Vienna, Virgin	ia 22182				
candidacy.	ould be filed with the principal campaign		ommittee, to receive and expend funds on behalf of my		
(b) Address (number and st	reet)				
(c) City, State, and ZIP Cod					
(c) Oily, State, and 217 Ood					
I certify that I h	ave examined this Statement and to the	best of my knowledge	and belief it is true, correct and complete.		
Signature of Candidate			Date		
NOTE: Submission of false, er	roneous, or incomplete information may	subject the person sign	ning this Statement to penalties of 52 U.S.C. §30109.		
9-00068			FEC FORM 2 (REV. 02/200		

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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Page	 of	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

B. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on be candidacy. NOTE: This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)				
	(b) Address (number and street)				
	(c) City, State, and ZIP Code				
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full)				
	(b) Address (number and street)				
	(c) City, State, and ZIP Code				
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full)				
	(b) Address (number and street)				
	(c) City, State, and ZIP Code				
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full)				
	(b) Address (number and street)				
	(c) City, State, and ZIP Code				

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CORNEL WEST FOR PRESIDENT P.O. BOX 8207 8150 LEESBURG PIKE, STE. 180B VIENNA, VA 22182 UNITED STATES US

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